

**Supplementary table** Summary of findings from studies of children and adolescents with persistent symptoms after SARS-CoV-2 infection











School concerns 67% (6), brain fog 44% (4), breathing trouble/dyspnoea 44% (4), dizziness 44% (4), lymphadenopathy 22% (2), anxiety 22% (2), muscle weakness 11% (1), nonepileptic seizures 11% (1), panic attacks 11% (1), abnormal movements 11% (1), lung pain 11% (1), parosmia 11% (1), functional neurological disorder 11% (1), cognitive issues 11% (1), pain 11% (1), sensory issues 11% (1), facial flushing 11% (1), diarrhoea 11% (1), sore throat 11% (1)

Nogueira	Random ✓ -	8	11% (8/72)	25%	nr	0%	0%	nr										
Lopez <sup>30</sup>	Median 9w		Median 12y, IQR 10-14y															
Cs (2C)	IQR 5-10w		50%															
Spain			13%															

Most frequent symptoms were low-grade fever, asthenia and headache

Osmanov <sup>24</sup>	>5m ✓ -	518	24% (126/518)	100%	nr	100%	3%	3%	11%	5%	<1%	2%	<1%	2%	1%	2%	2%	5%	2%
PCS (2B)			Median 10y, IQR 3-15y, r 2d-18y																
Russia			52%																
			45%																

Decreased physical activity 5% (24), disturbed taste 3% (16), hypersomnia 3% (15), hyperhidrosis 3% (13), diarrhoea 2% (10), blurred vision 2% (10), congested or runny nose 2% (10), hair loss 2% (9), constipation 2% (8), difficulty breathing 1% (7), nausea 1% (6), arthralgia 1% (6), dizziness 1% (5), palpitations 1% (5), vomiting <1% (4), urination problems <1% (3), tremor <1% (3), menstrual changes <1% (3), pain on breathing <1% (2), cannot control movement <1% (2), ageusia <1% (2), problems with balance <1% (2), tingling <1% (2), conjunctivitis <1% (2), bleeding <1% (1), problems swallowing <1% (1), problems speaking <1% (1)

Positive correlation between increasing age, allergic disease and symptoms

<sup>7</sup> Sante <sup>17</sup>	Random but ✓ ✓ <sup>9</sup>	29	41% (12/29)	100%	10%	17%	nr	33%	42%	8%	nr	nr	25%	17%	17% <sup>8</sup>	25%	nr	nr	nr
CSS (2C)	>5w		Mean 10y <sup>10</sup> , SD 4.5y					4	5	1			3	2	2	3			
Italy			34%																

Gastrointestinal symptoms 33% (4), post-exertional malaise 25% (3), tachycardia 8% (1)

Say <sup>25</sup>	>4w ✓ ✓	151	8% (12/151)	100%	36%	8%	nr	nr	3%	nr	nr	nr	nr	5%	nr	nr	nr	nr
PCS (2B)			Median 2y, SD 3.5y, IQR 1-7y															
Australia	>12w		42%															

nr

nr/88%

<sup>7</sup> Smale <sup>31</sup>	Random ✓ ✓	30	30% (9/30)	100% 17% 17% 0 3%	nr nr nr nr nr 7% nr nr nr 3% nr							
RCS (2C)	Mean 101d		Mean 9y, SD 5.2y, r 33m-17y		1				2			1
Latvia	SD 17d		43%									
			23%									
			nr/nr									
Arthralgia 3% (1), ageusia 3% (1), microhaematuria 3% (1)												
Sterky <sup>26</sup>	>16w ✓ -	55	22% (12/55)	100% 0% 100% 5% 7% <sup>11</sup> 15% nr 5% nr 7% <sup>8</sup> 2%	nr 4% nr							
PCS (2B)	Median 219d		≤18y	4	8	3	4	1				2
Sweden	r 123-324d		42%									
			35%									
			95%/92%									
Impaired daily activities 7% (4), depression/dysphoria 5% (33), respiratory symptoms 5% (3), gastrointestinal symptoms 5% (3), congested nose 2% (1)												
Longer hospitalisation associated with more severe persistent symptoms												
PIMS-TS associated with higher prevalence of persistent symptoms												

<sup>1</sup> among children with SARS-CoV-2 infection

<sup>2</sup> %, n of children with SARS-CoV-2 infection

<sup>3</sup> by polymerase chain reaction on a nasopharyngeal swab or by blood serology

<sup>4</sup> only asthma reported

<sup>5</sup> response and inclusion rates not reported separately for cases and controls

<sup>6</sup> chest and throat pain not reported separately

<sup>7</sup> potential overlap of patients

<sup>8</sup> myalgia and arthralgia not reported separately

<sup>9</sup> only for blood drawing

<sup>10</sup> in children with persistent symptoms

<sup>11</sup> headache and myalgia not reported separately

<sup>18</sup>F-FDG PET – fluorodeoxyglucose-positron emission tomography

Cs – case series

CSS – cross-sectional study

d – days

ICU – intensive care unit

IQR – interquartile range

IRR – incidence rate ratio

m – months

nr – not reported

PCS – prospective cohort study

PIMS-TS – paediatric inflammatory multisystem syndrome temporally associated with SARS-CoV-2

r – range

RCS – retrospective cohort study

SD – standard deviation

w – weeks

y – years